

**Ohio Department of Job and Family Services (ODJFS)
Drug Utilization Review (DUR) Board
Quarterly Meeting
May 19th, 2010**

The quarterly meeting of the ODJFS DUR Board was called to order at 12:10 PM in room 1948 of the Riffe Building, 77 S. High St. Columbus, Ohio. Thomas Gretter, MD, presided. The following Board members were present:

David Brookover, RPh
Michael Farrell, MD
Kevin Mitchell, RPh,
J. Layne Moore, MD
Lenard Presutti, DO
Donald Sullivan, PhD, RPh

Also present were Margaret Scott, RPh, DUR Administrator, Jill Griffith, RPh, DUR Director, and from the University of Cincinnati College of Pharmacy, Pam Heaton RPh, PhD and Bob Cluxton, RPh, PhD. Robert Kubasak, RPh was absent. Approximately 20 observers were present, most representing pharmaceutical manufacturers.

Reading, Correction & Approval of Previous Minutes:

The February 24th, 2010, DUR Board minutes were approved. (1st J. Moore, 2nd L. Presutti).

DUR Committee Report:

J. Griffith gave the DUR committee report.

In March, the DUR committee reviewed 859 profiles of patients on proton pump inhibitors (PPIs) after hospitalization. Although the run generated a large number of profiles to review, few profiles warranted letters and therefore, no letters were mailed.

In April, the DUR committee looked at 160 profiles of patients on concurrent Suboxone or Subutex and any other controlled substance, tramadol or carisoprodol. The Board reviewed the letter, response form, Ohio Automated Rx Reporting System (OARRS) registration instructions and CyberAccess information. The mailing is in process. D. Sullivan noted that buprenorphine is one of the fastest-growing street drugs. K. Mitchell said that it is important to have immediate access to these drugs so he does not recommend putting them on prior authorization, but suggested a denial of narcotics for patients with a history of buprenorphine. Ms. Scott will continue to research policy options.

In May, the DUR committee reviewed 760 profiles of patients who may be "doctor shopping." Profile selection criteria included 8 claims from three or more prescribers in a 45 day period. Patients with a diagnosis of cancer were excluded. The Board provided

comment on a draft letter, response form, OARRS instructions and CyberAccess inserts. K. Mitchell suggested that prescribers may not be aware that CyberAccess and OARRS are free services. A report showing by region and by county where doctor shopping may be occurring was also provided.

The Board was provided results thus far of October and November 2009 reviews. In October 2009, the DUR committee reviewed profiles of patients on proton pump inhibitors for greater than 18 months with no attempt to taper dose or discontinue use. Letters were mailed in December 2009 with the University of Cincinnati clinical review document. Results so far show that 162 letters were mailed and 59 response forms were returned by prescribers (36%). Thirteen responded that their patients had upcoming appointments to discuss therapy and 19 responded that PPI use was appropriate.

In November 2009, the DUR committee reviewed the profiles of patients on both a CYP 2D6 inhibiting antidepressant (bupropion, duloxetine, fluoxetine, paroxetine, sertraline) and tamoxifen. Letters were mailed January 2010 the results of this run show that 52 letters were mailed and 26 response forms were returned (50%). Four responded that their patients have upcoming appointments to discuss therapy and six responded that they intended to modify antidepressant therapy.

Health Plan Policy:

M. Scott discussed the Ohio Prescription Drug Abuse Task Force that was created by Governor Strickland through an executive order. Members include state agencies, provider associations, and law enforcement.

Unfinished Business:

M. Scott asked Board members who were not present at the February meeting (D. Sullivan, M. Farrell, T. Gretter) to sign the conflict of interest form for 2010.

New Business:

The Board considered potential DUR topics such as concurrent use of two or more long acting opiates and a review of the centrally acting skeletal muscle relaxants. D. Sullivan noted that the DEA has started the process of scheduling carisoprodol products, and they are tracked in OARRS.

Astra Zeneca requested and was permitted to show the Board information on their naproxen sodium/esomeprazole magnesium product.

Announcements:

The next DUR Board meeting will be at noon on Wednesday, September 15th. The fourth quarter 2010 meeting will take place at noon on Wednesday, November 17th.

Adjournment:

T. Gretter adjourned the meeting at 12:51 PM.

Respectfully submitted:

Jill R.K. Griffith B.S., Pharm.D., DUR Program Director